

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004245

**Entity Name:** UNITED EARTH FOUNDATION, INC.**Current Principal Place of Business:**5026 6TH AVENUE N  
ST. PETERSBURG, FL 33710**Current Mailing Address:**5026 6TH AVENUE N  
ST. PETERSBURG, FL 33710**FEI Number:** 65-0935369**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VINES, LISA  
5026 6TH AVENUE N  
ST. PETERSBURG, FL 33710 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PEREZ, CRIS  
Address        5240 NW 196TH TERRACE  
City-State-Zip: MIAMI FL 33055

Title            BDM  
Name            BRYSON, COREY  
Address        11415 IVY FLOWER LOOP  
City-State-Zip: RIVERVIEW FL 33578

Title            TREASURER, SECRETARY  
Name            VINES, LISA  
Address        5026 6TH AVE N  
City-State-Zip: ST PETERSBURG FL 33710

Title            BDM  
Name            TOMMERDAHL, ERIC  
Address        29503 CENTRAL BLVD  
City-State-Zip: PAISLEY FL 32767

Title            VP  
Name            GATES, DAWN  
Address        29503 CENTRAL BLVD  
City-State-Zip: PAISLEY FL 32767

Title            BDM  
Name            MOFFETT, KRISTI  
Address        5240 NW 196TH TERRACE  
City-State-Zip: MIAMI FL 33055

Title            BDM  
Name            BRYSON, LAURIE  
Address        11415 IVY FLOWER LOOP  
City-State-Zip: RIVERVIEW FL 33578

Title            BDM  
Name            PEREZ, RAY  
Address        5240 NW 196TH TERRACE  
City-State-Zip: MIAMI FL 33055

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LISA VINES**TREASURER,  
SECRETARY****02/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

|                 |                         |
|-----------------|-------------------------|
| Title           | BDM                     |
| Name            | PORATH, KAT             |
| Address         | 5026 6TH AVENUE N       |
| City-State-Zip: | ST. PETERSBURG FL 33710 |